I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number: 00757 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Name Registration Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned gany to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: **|** 00757 The address associated with Customer Number: ORFirm or Individual Name Address City Zip Country

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee,

Fmail

and must identify the application in which this Power of Attorney is to be filed.

Telephone

Assignee Name and Address:

SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee			
Signature	11	inde Modes	Date 01/12/2010
Name		/ Trinda Moores	Telephone 905-428-5915
Title		Director of Human Resources & Administration	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and This collection of Information is required by 3f UPF 1.31, 1.32 and 1.33. The information is required to orse nor relate a comest gry me posses where is to me upon the control of the property of the propert FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.